



RUT-50-X Amended Private Party Vehicle Use Tax Transaction

Read this information first

Everyone must complete Steps 1, 2, and 4. You must also complete Step 3 if you are changing financial information.

Amount you are paying: \$ _____
Make your check payable to "Illinois Department of Revenue."

Step 1: Identify yourself

1 PV number from original return PV _____

2 Your name _____

3 Co-owner's name _____

4 Your address from original return

Number and street

City State ZIP

5 Your current mailing address (if different from original return)

Number and street

City State ZIP

6 County _____

7 Daytime telephone number (____) _____

8 SSN _____
Social Security number

or FEIN _____
Federal employer identification number

9 Driver's license number _____ - _____ - _____

Step 2: Mark the reason why you are filing an amended return

(See instructions.)

1 _____ I have returned the vehicle and the deal was cancelled.
Attach proof.

2 _____ The vehicle description (*i.e.*, year, make, model, odometer reading, or VIN) is incorrect. The correct information is
Year: _____
Make: _____
Model: _____
Odometer reading: _____
VIN: _____

5 _____ I reported the purchase incorrectly as a motor vehicle but it is actually a motorcycle or an ATV.

6 _____ I figured the incorrect Illinois tax due amount from Table A or Table B, or I used the incorrect table to figure the Illinois tax due amount. The original purchase price of the vehicle is \$_____
Attach proof of purchase price

7 _____ I figured an incorrect amount of municipal or county private party vehicle use tax due.

3 _____ I should have marked one of the exemptions because I qualify for the following reason (check one).
a _____ Organization with tax-exempt status — Provide exemption number: **E-**_____
b _____ Farm implement, or ready-mix concrete truck
c _____ Rolling stock — Provide certificate of authority number: _____
d _____ You were an out-of-state resident and the item was used outside IL for at least three months. Enter purchase date: ____/____/____
Month Day Year
e _____ Estate gift for surviving spouse

8 _____ Other. Please explain. _____

4 _____ I should have marked one of the following exceptions to the standard tax rate (check one):
a _____ Estate gift for beneficiary (**not** surviving spouse)
b _____ Business reorganization
c _____ Transferred or purchased from spouse, parent, brother, sister, or child (circle one).

Please turn page to complete Steps 3 and 4. ➡

Step 3: Correct your financial information

Complete this Step only if you are changing financial information.
Please round to the nearest whole dollar.

	Column A Most recent figures filed	Column B Figures as they should have been filed
1 Illinois Private Party Vehicle Use Tax due.	1 _____	1 _____
2 Municipal private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	2 _____	2 _____
3 County private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	3 _____	3 _____
4 Add Lines 1, 2, and 3.	4 _____	4 _____
5 Credit for tax you previously paid to the state of _____ Please attach proof. See instructions.	5 _____	5 _____
6 Tax due. Subtract Line 5 from Line 4.	6 _____	6 _____
7 Total amount previously paid. Compare Column B, Line 6, and Line 7. • If Line 7 is greater than Column B, Line 6, write the difference on Line 8. • If Line 7 is less than Column B, Line 6, write the difference on Line 9.		7 _____
8 Overpayment — This is the amount you have overpaid. Go to Step 4 and sign this return.		8 _____
9 Underpayment — This is the amount you have underpaid. Please pay this amount. Go to Step 4 and sign this return. Make your check payable to “Illinois Department of Revenue.”		9 _____

Step 4: Sign below

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete. I understand that the penalty for willfully filing a false return shall be a fine not to exceed \$1,000 or imprisonment in a penal institution, other than the penitentiary not to exceed one year, or both fine and imprisonment.

Your signature	Date	Co-owner's signature	Date
Your mailing address (please print)	City	State	ZIP

Mail to:
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19034
SPRINGFIELD IL 62794-9034

Note *Please write the amount you are paying on the line provided in the “Read this information first” section on the front of this return.*